



16711 US PTO  
032904

22856 U.S.PTO  
10/812638



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

FIRST-NAMED INVENTOR OR Mario Abdennour et al.  
APPLICATION IDENTIFIER:

FOR: CHARACTERIZATION OF AN ANTIBIOTIC IMPREGNATED  
DELIVERY SYSTEM AS AN INTRACANAL MEDICAMENT IN  
ENDODONTIC THERAPY

MAIL STOP PATENT APPLICATION  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR FILING A NEW NONPROVISIONAL APPLICATION  
UNDER 37 C.F.R. §1.53(b)**

1. This is a request for filing a continuation patent application under 37 C.F.R. §1.53(b). This application is a continuation of USSN 09/963,880, filed September 26, 2001, which claims priority of 60/240,004, filed October 12, 2000, and is a continuation-in-part of USSN 009/540,088, filed March 31, 2000, which claims priority to USSN 60/127,497, filed April 2, 1999 and Foreign Application No. CA 2343471, filed March 30, 2001.
2. Specification and Drawings (Total pages: 35);  
Specification (21 pages); Claims (3 pages); Abstract (1 page); and  
Drawings: 10 sheets (Figures 1 – 10)

Formal

3. Declaration and Power of Attorney  
(Copy from Parent Application 09/963,880) (3 counterparts, 3 pages, total of 9 pages)  
 Signed

4. Revocation By Assignee And New Power of Attorney  
(Copy from Parent Application 09/963,880) (11 pages)
5. Information Disclosure Statement Form PTO-1449  
(Copy from Parent Application 09/963,880) (3 pages)

U.S.S.N.: TBA  
Filed: March 29, 2004

6. Fee Calculation

CLAIMS AS FILED					
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 C.F.R. 1.16(a) \$ 770.00
Total Claims (37 C.F.R. 1.16(c))	20	- 20 =	0	\$18.00	\$ 0
Independent Claims (37 C.F.R. 1.16(b))	7	- 3 =	4	\$86.00	\$ 344.00
Multiple Dependent Claim(s), if any (37 C.F.R. 1.16(d))	0			\$290.00	\$ 0
				SUBTOTAL:	\$1,114.00
				Reduction by 50% for filing by small entity:	\$ 557.00
				<b>TOTAL FEE:</b>	<b>\$ 557.00</b>

7. A check (#18367) in the amount of **\$557.00** is enclosed. The Commissioner is authorized to charge any additional fees due, or credit overpayments, to Deposit Account No. 50-0311, Ref. No. 25669-014 CIP CON.

8. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 50-0311, Ref. No. 24299-508-CON3:

Fees required under 37 C.F.R. §1.16;  
Fees required under 37 C.F.R. §1.17;  
Fees required under 37 C.F.R. §1.18.

9. Return Receipt Postcard Enclosed.

Respectfully submitted,

  
Ingrid A. Beattie, Reg. No. 42,306  
Janine M. Susan, Ph.D., Reg. No. 46,119  
Attorneys for Applicants  
MINTZ, LEVIN, COHN, FERRIS,  
GLOVSKY and POPEO, P.C.  
One Financial Center  
Boston, Massachusetts 02111  
Tel: (617) 542-6000  
Fax: (617) 542-2241  
Customer No. 30623